U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

I. File Number U - 01928	2. Fiscal Year Covered From: 1			
3. Name and address of person filing.	Name, file number, and address of labor organization.			
Name Arthur R Przybylowicz	Name Michigan Education Association			
At clina	Labor Organization File Number 512-840			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any PO Box 2573			
Street 3366 Chula Vista Drive	Street 1216 Kendale Blvd.			
City Williamston	City East Lansing			
State Michigan ZIP Code + 4 48895-9596	State Michigan ZIP Code + 4 48823-2008			
Position in labor organization. Ass. Exec. Dir.and General Co	ounsel			
Name and address of Employer (including trade name, if any)	7.a. Nature of Interest, Transaction, or Income.			
Name and address of Employer (including trade name, if any). Name Trade Name, if any:				
Name				
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	7.a. Nature of Interest, Transaction, or Income.			
Name Trade Name, if any:	7.a. Nature of Interest, Transaction, or Income.			
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City	7.a. Nature of Interest, Transaction, or Income.			
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income.			
Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 Sig 15. Signature and verification. The undersigned declares, under penalty or submitted in this report (including the information contained in any accompanundersigned's knowledge and belief, true, correct, and complete. (See the second complete)	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. 8.c. Amount. 9.c. Amo			
P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 Sig 15. Signature and verification. The undersigned declares, under penalty or submitted in this report (including the information contained in any accompan	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. 7.b. Amount. 7.b. Amount. 7.b. Amount. 7.b. Amount.			

Name of Person Filing Arthur Przybylowicz	File Number U- 01928		
B. Held an interest in or derived income or economic benefit with monetary vs substantial part of which consists of buying from, selling or leasing to, or othe of an employer whose employees your labor organization represents or is act (2) any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organization.	rwise dealing with the business ively seeking to represent, or directly to, or otherwise		
8. Name and address of Business (including trade name, if any). Name White, Schneider, Young & Chiodini, P.C. Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 2300 Jolly Oak Road City Okemos State Michigan ZIP Code +4 48864-3546	9. Business deals with: a. Labor Organization b. Trust c. Employer		
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	11.a. Nature of such dealing. White, Schneider is one of the outside law firms that represents MEA, its affiliates and members.		
Street City State ZIP Code + 4	11.b. Approximate dollar value of such dealing. \$1,113,135 12.a. Nature of interest held or income received. I received \$6,250 as the final installment of a termination and stock redemption agreement entered into in December 2000. My wife, Suzanne K. Clark, received \$6667 as a part of a termination and stock redemption agreement of November 2001.		
C. Received from any employer (other than an employer covered un	12.b. Amount. \$12,917 der parts A and B above)		
or from any labor relations consultant to an employer any payment of mone 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	14.a. Nature of payment.		
Citato III	14 h. Amount of payment		

or Consultant

13.b. Is the Business an Employer

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).		9. Business deals with: a. Labor Organization		
Name Amberg, Firestone & Lee, P.C.				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any Suite 101 Street 24300 Southfield Road		b. Trust		
		c. Employer		
City Southfield	Lan out at Fra			
State Michigan	ZIP Code + 4 48	3075-2856	11.a. Nature of such dealing.	
10. If 9.b. or 9.c. is checked give trust or employer's name. Name				
		The Amberg law firm was one of the outside law firms that represented MEA, its affiliates and members until September 30, 2004.		
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street				
City				
State	ZIP Code + 4		11.b. Approximate dollar value of such dealing.	\$508,268
			12.a. Nature of interest held or income received.	
			My wife, Suzanne K. Clark, was emp counsel" capacity with the law fir 31, 2004. She did not share in th law firm. She received gross rece firm during January through Septem \$82,486.	m until August e profits of the ipts from that
			12.b. Amount.	\$82,486

8. Name and address of Business (including trade name, if any). Name Lee & Associates, PLLC Trade Name, if any: Lee & Clark	9. Business deals with: a. Labor Organization b. Trust		
Name and the second	~		
Trade Name, if any: Lee & Clark	~		
\$50000000000000000000000000000000000000			
P.O. Box, Bldg., Room No., if any Suite 113			
Street 24901 Northwestern Highway	c. Employer		
City Southfield			
State Michigan ZIP Code + 4 48075-2200			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name 1	Beginning September 1, 2004, Lee & became one of the outside law firms MEA with the breakup of Amberg, Fir C.	representing	
Street City			
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$135,313	
	12.a. Nature of interest held or income received.		
	Beginning September 1, 2004, Suzanne K. Clark, entered into an affiliation with Michael K. Lee. Her law practice is Suzanne K. Clark, PLLC, and Mr. Lee's practice is Michael K. Lee and Associates, PLLC. Suzanne's gross receipts from MEA was \$31,923.		
	12.b. Amount.	\$31,923	